

Abstract 570

TITLE: An Overview of Corrections: How Do You Gain Access for Prevention?

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ISSUE: In 1997 U.S. prisons and jails held over 1.7 million persons. These inmates manifest disproportionately high rates of infectious disease and are at high risk for many health problems due to risk factors that include use, unprotected sex, and sexual assault. Despite high disease rates and high risk behavioral practices among those currently incarcerated and recently released, corrections, public health, and community-based care providers have not developed relationships that effectively link and deliver surveillance, prevention, and treatment including substance abuse and social services within correctional settings. Adult and juvenile populations are often considered isolated entities from society. However, incarcerated populations are recognized as an integral part of the larger community, particularly from a public health perspective.

SETTING: U.S. prisons, jails, and juvenile detention centers.

PROJECT: The criminal justice system is a complex system that includes the courts, jails, prisons, detention, probation and parole. The session will present a corrections perspective on how public health and care providers can gain access and successfully work within correctional settings. In developing this collaboration, it is critical to understand: 1) the mission of corrections, 2) the security and physical limitations of inmates and staff, 3) program delivery procedures, 4) system rules and regulations, and 5) ways correctional to gain the support of administrators and staff.

RESULTS: Findings from the recent CDC/NIJ surveys and case studies indicated that most correctional systems have some collaboration with public health agencies. Most collaborations focused on inmate surveillance, testing, education, and treatment services with very limited efforts focused on discharge planning and of continuity care for inmates being released. Key factors for collaboration are: (1) data on the burden of disease, (2) organizational, legislative, or regulatory provisions, (3) attitudes and philosophies, (4) resource allocation, and (5) communication and information exchange.

LESSONS LEARNED: CDC's experience thus far suggests that the extent and nature of public health/corrections collaborations in the prevention and treatment of HIV/AIDS, STDs and TB are limited in scope. Recent demonstration projects indicate how targeted prevention and treatment programs in correctional settings benefit the larger community.

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